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37013 ROSSI, KIMN	AS & McDOWELI Park Square, Suite 1:	/2010 L LLP.	OPAR P	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR .	ATTORNEY DOCKET NO	D. CONFIRMATION NO.
09/965,796 TITLE OF INVENTION	10/01/2001 N: IMMUNOTHERAPY	OF B-CELL MALIGNA	David M. Goldenberg		IMMU:007US3	3640
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S)	DUE DATE DUE
nonprovisional	YES	<del>\$755</del> \$1510	\$300	02 <sup>\$</sup> /14/8	2011 INTEFSW 00003	02/28/2011 1 <b>89</b> £ <b>09965796</b>
EXAMINER		ART UNIT	CLASS-SUBCLASS	01 FC::		1510.00 OP
HARRIS, ALANA M		1643	424-141100	02 FC:1504		399.99 OP
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3. ASSIGNEE NAME A	AND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)		
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a. Applicant clain	atus (from status indicate ns SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no	onger claiming SMA	LL ENTITY status. See	37 CFR 1.27(g)(2).
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Authorized Signature	/Barbara A. I		February 11, 2011			
Typed or printed name Barbara A. McDowell			Registration No. 31,640			

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